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DIRECTIONS FOR USING THE NITRATE OF SILVER IN THE CURE OF INFLAMMATION, WOUNDS AND ULCERS.

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> "Never is surgery so beautiful, and brilliant, as when obtaining a cure without the destruction of any organ, without plunging the bistoury into quivering flesh, and without causing the effusion of blood."—*Lisfranc.*

After twenty years' further experience in the application of the nitrate of silver in the cure of inflammation, wounds and ulcers, I am desirous of giving full and clear directions for the use of it, particularly as the proper mode of application is quite essential to secure its good effect. I have preferred doing this rather than giving cases in detail, of which I could have readily produced a volume annually.

There is no form of acute superficial inflammation, arising from either constitutional or mechanical causes, where the nitrate of silver may not be applied with great safety and advantage.

The observation of the celebrated John Abernethy is true with respect to the application of the nitrate of silver—"Subdue local irritation, and regulate the action of the digestive system, and you control all controllable disease."

The great obstacle to the general and free use of the nitrate of silver, even at the present day, appears to arise from the impression on the minds of many surgeons that it is a caustic, a destructive agent. If they could be divested of that idea, and use it as freely as they would a common blister of cantharides, their fears would soon subside, from repeatedly observing the safety of the application, and also its beneficial effects. In my own practice I have always considered it a safer remedy than cantharides, as it may be applied freely over a surface, even where very active inflammation exists, or where there is an extensive surface denuded of its cuticle. This remedy has also the advantage of not affecting the bladder, or producing strangury.

The nitrate of silver is not a caustic, in any sense of the word. It subdues inflammation, and induces resolution and the healing process. It preserves, and does not destroy, the part to which it is applied. If we compare a caustic, as the hydrate of potassa, with the nitrate of silver, we find that the hydrate of potassa destroys and induces a slough, and the ulcerative process; but if we touch a part with the nitrate of silver, the eschar remains for a time, and then falls off, leaving the subsequent parts healed.

If an ulcerated surface, secreting pus, be touched by the nitrate of silver, the succeeding discharge is immediately converted into lymph; it is the property of the hydrate of potassa, on the contrary, to induce not only ulceration but suppuration. In short, the peculiar properties of the nitrate of silver have long been kept unknown to us by the designation of lunar caustic, affording the most striking instance of the influence of a term, or of a classification, upon the human mind. The nitrate of silver and the hydrate of potassa (as indeed all caustics) are as the poles to each other; the first preserves, the second destroys; the first induces cicatrization, the second ulceration.

I have for some years past used the nitrate of silver in solution, as well as in the solid state, finding the concentrated solution more convenient for application, where the nitrate of silver has to be applied on a considerable surface, as in erysipelas, &c. The following is the formula I have of late used:—nitrate of silver, four scruples; distilled water, four drachms. Put the nitrate of silver into a half-ounce bottle, add the distilled water; the nitrate of silver will be dissolved in a short time, and if rightly prepared the solution will be clear and transparent; this quantity may be kept conveniently in the pocket of the surgeon, for daily use. The solution may be applied with a small piece of sponge, an inch in length, and one third of an inch in breadth, stitched on the eye at the end of a common silver probe; this makes a most convenient instrument, which may be kept in the pocket-case; it is not only useful for external inflammation, but can be used to internal parts of the throat, &c. Precaution should be taken to wash the sponge *well* with water after using it.

When the solid form of the nitrate of silver is used, it is necessary to moisten the surface to which it is applied, slightly, with pure water, and apply a long stick of the nitrate of silver *flat* upon the moistened surface, taking care that it be applied to every affected part.

It is necessary, for the successful application of the nitrate of silver, that the surface of the skin be free from any oleaginous matter, loose cuticle, or any other extraneous substance; the parts should be well washed with soap and water, and afterwards with water alone, to remove any particle of soap remaining.

It is essential to know the precise effect of the nitrate of silver, in the different degrees of its application. If the nitrate of silver be passed once slightly over the moistened skin of any part, except the hands or soles of the feet (upon which the cuticle is thicker than elsewhere), it induces an eschar, simply; if it be passed over the surface twice or thrice, to the eschar will be added some vesication; if more still, there will be vesication only. In the first place, there will be no pain; in the second and last, there will be soreness proportionate to the degree of vesication.

It is essential to the success of this plan of treatment, that these observations be kept constantly in view.

I shall now describe the mode of application of the nitrate of silver in the treatment

Of recent Bruised Wounds of the Skin, &c.—In recent bruised wounds of the skin, the nitrate of silver should be applied on the wound, taking care to leave no spot untouched, and upon the surrounding skin, to the breadth of one third of an inch, in such a manner as to induce an eschar, without vesication. Any moisture which may remain upon the wound is then to be removed by gently wiping the part with a little linen or lint, and the skin surrounding that in which the nitrate of silver was applied is to be moistened, and covered with gold-beater's skin, so that the whole may be protected from accident; the parts are then to be kept cool, free from covering, and exposed to the air.

This is usually all the treatment required in this kind of injury. It will be generally found, that an adherent eschar is formed, and that no further application or attention is required, excepting in old people, in whom the skin is sometimes irritable from various causes; in this case, a little fluid will form under the edges of the eschar, and will require to be evacuated by a small puncture, the gold-beater's skin being removed for this purpose, and then re-applied.

If the eschar be removed by accident at any time, the application of the nitrate of silver must be repeated as before. If due care be taken to avoid this kind of accident, it will not in general be found necessary to enjoin rest.

Of Small Ulcers.—The same method of applying the nitrate of silver may be used in small ulcers as in bruised wounds, particularly in exposed situations, as on the face, head and hands; in these situations the eschar often becomes adherent from the first application, but should the first attempt fail, and the eschar be unadherent, from fluid forming under it, a poultice of bread and water should be applied, for eighteen or twenty-four hours, to remove the eschar; when this is done, it should be treated as in larger ulcers, hereafter directed, which generally effects a cure with one or two applications.

Of Large Ulcers.—I have abandoned the attempt of healing large ulcers by the unadherent eschar, on account of the inconvenience and trouble attending the evacuation of the fluid from beneath the eschar, which is daily necessary to insure an adherent eschar.

The best treatment is as follows:—Apply the nitrate of silver twice over the ulcer and surrounding skin, then cover the ulcer with a piece of black lint,* and upon it a plaster of neutral ointment,† spread rather thick on linen, a compress of linen, and a calico roller lightly applied to secure the whole. This plan is attended with much less trouble, and requires the attention of the surgeon only every third or fourth day. The same remark may be here made of ulcers as in inflammation, which is of great practical importance respecting the action of the nitrate of silver, that its influence is exerted for three days in an active state, and declines on the fourth; on that account, any intermediate dressings are unnecessary. In small ulcers, a second application of the nitrate of silver in substance is often not necessary, as the black lint, by absorbing the moisture, becomes firmly adherent, and remains on the ulcer until it is healed; if not healed when the lint comes away, a repeated dressing every fourth day, of black lint; neutral ointment is required.

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* Black lint:—Nitrate of silver, two drachms; distilled water, four ounces. Mix, and make a solution. Saturate an ounce of fine lint in this solution; then let the lint be exposed in a flat, shallow vessel, to allow it to dry by evaporation.

† Neutral ointment:—Lead plaster, eight ounces; olive oil, eight ounces; prepared chalk, four ounces; distilled vinegar, eight ounces. The acetic acid and the chalk must be well mixed in a mortar, and the lead plaster and the olive oil, previously slowly melted together, are to be added. The whole is then to be stirred together until cool.

Of old Ulcers of the Legs.—Old ulcers of the legs have long been the opprobrium of surgery, and I recollect the following remark made in one of our periodical works soon after the publication of my essay On the Use of the Nitrate of Silver, that "Old ulcers of the legs in 1830, would be old ulcers of the legs in 1840;" that no improvement would be made in the surgical treatment.

After the lapse of nearly twenty years, I am led to conclude that there has been a very manifest improvement in that department of surgery—not so much by the permanent cure of old ulcers of the legs by the use of the nitrate of silver as I anticipated, but by what is far better—the prevention by the early use of that remedy.

I have no doubt that if these directions for the treatment of external inflammation, in bruised wounds, and also that of recent ulcers, with the occasional assistance of graduated pressure, were followed, we should seldom have severe cases of old ulcers of the legs.

From my own observation and inquiry, I am led to believe that they have materially decreased in number in this locality, both in hospital and private practice; indeed, so much so, that if I were to commence my treatment as I did twenty-four years ago, I should have great difficulty in finding one half the cases I then readily obtained, notwithstanding there is an increase of one third more of inhabitants.

Of Ulcers attended with Inflammation.—If ulcers attended with inflammation should occasion constitutional disorder, I would prescribe the patient an emetic of ipecacuanha, a calomel pill, followed by an active saline purgative; to apply a bread-and-water poultice, every eight hours, on the ulcer; and cloths, moistened with cold water, constantly over it and the inflamed part, as an evaporating lotion; and to keep in bed for twenty-four or thirty-six hours.

After this period, the treatment as directed for ulcers, with the nitrate of silver, black lint and neutral ointment, &c., may be generally pursued. Should there still be swelling or œdema arising from the ulcer, it will be necessary to enjoin absolute rest in bed, or under such circumstances the ulcer will not heal.

Of Punctured Wounds, Bites and Stings.—In recent punctured wounds the orifice must be first examined. If there be any extraneous body within it, or loose skin surrounding it, they should be first removed. A drop of water should be put on the puncture, and the surrounding skin slightly moistened. The nitrate of silver is to be applied to the former, until some pain be experienced; and over the latter lightly, so as not to induce vesication. It should be applied to the skin for an inch round the puncture, and to a greater extent, if the swelling exceeds this space. The part is then to be exposed to the air.

These cases are generally adherent from the first application of the nitrate of silver; but I have sometimes found the eschar to separate from the wound before it has quite healed, owing to its conical form; it is then only necessary to repeat the application of the nitrate of silver slightly to complete the cure.

At a later period of punctured wounds, inflammation is usually present; the punctured orifice is nearly closed by the swelling, and a little pus or fluid has generally formed within. A slight pressure is to be applied to evacuate this fluid, a drop of water should be put on the orifice, and the nitrate of silver is then to be well applied within the puncture and upon and a little beyond the surrounding inflamed skin, as before directed, and the parts are to be exposed to dry. In this manner an adherent eschar is formed, and the inflammation subsides. If there be any vesication it may be simply left to nature; the fluid is soon absorbed or evaporated.

If there be reason to suppose that an abscess has formed deeply, it must be opened freely with the lancet, and the nitrate of silver is then to be applied on the cavity and on the surrounding inflamed or swelled skin. A poultice of bread and water and cold water as a lotion is then to be applied over the whole. The application of the nitrate of silver may be repeated every second or third day if the swelling or inflammation require it, and the cold poultice may be renewed every eight hours.

I have several times applied the nitrate of silver over an inflamed surface when I was not aware that suppuration had taken place. Even in these instances an immediate check was given to the surrounding inflammation, and relief to the pain, but two or three days afterwards there was increase of swelling attended by some pain, which is not usual excepting when there is matter or some extraneous body underneath.

In these cases a free incision must be made with the lancet, and afterwards apply the nitrate of silver and cold poultice.

In doubtful cases, where suppuration may be expected, it is advisable to apply a poultice after the nitrate of silver, as the part may be in a fitter state, to detect any matter, than if an hard eschar be over it.

The bites of animals and the stings of insects have a speedy remedy in the nitrate of silver, if applied as directed in punctured wounds.

Of Wounds received in Dissection.—Previous to a *post-mortem* examination, as a precautionary measure, any sores or scratches on the fingers or hands should have the nitrate of silver applied to them to form an eschar.

After a *post-mortem* examination, wash the hands well in tepid water, then bathe them in salt and water, so that any small wound or abrasion may be detected by the smarting pain occasioned by its application; this is especially desirable after a *post-mortem* examination of abdominal inflammation and of puerperal patients, as a number of fatal cases have occurred from very slight wounds unobserved at the time. Every suspicious spot should be then moistened with a little water, and the nitrate of silver freely applied on the affected parts, and over the surrounding skin, to form an eschar. This plan will be a most effectual preventive of mischief in recent injuries.

If the puncture be deep it will be necessary to suck the part well first, then put a drop of pure water on the orifice of the puncture, and apply the nitrate of silver well, so as to occasion a smarting pain within the wound, and apply it lightly on the surrounding skin.

In the second stage, when the wound becomes painful or inflamed, and there is a tumor or elevation of the skin, the removal of the small tumor with the lancet, or a crucial incision must be made through it, and then apply the nitrate of silver on the wound, and on, and beyond, the inflamed and swollen parts; if on the following or subsequent days the inflammation spreads, the application of the nitrate of silver should be repeated; an ipecacuanha emetic, followed by a purgative, would be desirable, if the digestive organs are affected.

In the third stage, inflammation is rapidly spreading, violent constitutional symptoms are present, and the violent knocking pain in the head peculiar to this stage. Venesection, ipecacuanha emetic, followed by a purgative, two grains of calomel with two grains of James's powder every three or four hours, till the mouth is affected, appear to be best treatment. The nitrate of silver should be applied freely on all the inflamed surface, and along the inflamed absorbents.

Wounds from the Bites of Rabid Animals.—I read a paper some time ago, in a work on veterinary surgery, where the writer mentions his entire confidence in the application of the nitrate of silver to the bites of rabid animals.

An objection has been made to the excision of the part alone, on account of the danger of the virus from the bitten wound being conveyed to the recent wound made with the scalpel. To avoid this, the parts may first be well washed with warm water, with the assistance of Read's, or any powerful syringe, to remove the saliva away from the wound; the nitrate of silver should be then freely applied within the wound, after that the bitten part should be removed with the scalpel, and afterwards apply the nitrate of silver again to the wound, making doubly sure of having the poisoned parts removed. The sores to be healed by eschar.

Of Lacerated Wounds.—After the wound has been well cleansed, and foreign matters removed, the nitrate of silver must be applied close upon the irregular edges of the wound, but not within the wound, and on the surrounding skin; afterwards the parts should be brought into approximation by straps of adhesive plaster, to be healed by the first intention. Should the laceration be considerable, the interrupted suture may be used with the same success and safety as in an incised wound, but the suture must be applied *before* the application of the nitrate of silver; the nitrate of silver should be applied on the edges of the wound, on the *line* of the wound, and on the surrounding skin; the parts should be supported by adhesive straps, without any other covering; the ligature may be removed about the third day, and the nitrate of silver applied to the small orifices left, to prevent any ulceration.

Great advantages are derived from healing wounds, particularly on the face, by the aid of the nitrate of silver.

1. It prevents the irritation arising from the irregular edges of a lacerated wound; adhesive inflammation takes place, and the wound is healed by the first intention, as in an incised wound.

2. The inflammation, swelling and irritative fever consequent on lacerated wounds, are in a great degree prevented, and there being no ulcerative process, there is no loss of substance, so that unsightly scars and raised cicatrices are prevented.

To arrest the Hæmorrhage from Leech-bites.—Apply the point of a stick of the nitrate of silver firmly within the little orifice for a short time; then a small piece of black lint must be firmly pressed on the part with the finger for two or three minutes; by this means the bleeding is effectually stopped; the black lint becomes firmly adherent, adhesive inflammation is produced, and the lint does not separate till the leech-mark is healed.

Incised Wounds.—Apply the nitrate of silver slightly on the skin surrounding the wound, *not within the wound*, and bring the edges of the wound together with adhesive plaster, or uninterrupted sutures; by this means any subsequent inflammation or swelling of the skin is prevented, and the wound heals by the first intention. In the operation for hare-lip, or in wounds on the face, adhesive inflammation is immediately produced by this treatment, and the cure safely effected. When the ligatures are removed, the small orifices remaining should be touched with the nitrate of silver, to prevent any ulceration.

Of Erysipelas.—In very slight attacks of erysipelas, sometimes an active purgative and low diet will be sufficient to remove the disease without the application of the nitrate of silver; but if constitutional symptoms are present, it is the safest plan to use both constitutional remedies and the nitrate of silver simultaneously.

The constitutional remedies, as the case may require, are venesection, emetic, purgative, and repeated doses of chloride of mercury and James's powder. The nitrate of silver to be applied as follows:—Wash the affected parts well with soap and water, then with water alone, to remove any particle of soap remaining, afterwards wipe the parts dry with a soft cloth; then apply the concentrated solution of the nitrate of silver two or three times over the whole inflamed surface, and beyond it on the surrounding healthy skin, to the extent of two or three inches. In about twelve hours it will be seen if the solution has been well applied. If any inflamed part be unaffected by it, it must be immediately re-applied to it. Sometimes even after the most decided application of the nitrate of silver, the inflammation may spread, but it is then generally much less severe, and it may be eventually checked by the repeated application of this remedy.

It is desirable to visit the patient every twelve hours, till the inflammation is subdued.

By this means, we have a complete control over the disease. If the erysipelas is attended by vesication, the vesicles should be broken and the nitrate of silver applied on the denuded, inflamed parts; but if the vesicles arise from the use of the nitrate of silver, they may be allowed to remain undisturbed.

In erysipelas of the face, when it is spreading on the forehead, or at all on the scalp, the head should be shaved as early as possible, that the extent of inflammation may be traced on the scalp, which often can only be detected by pain, or by œdema being felt on pressure with the finger. The solution requires to be applied very freely all over the scalp, where it scarcely or never produces vesication.

When the inflammation has been subdued by an early use of the nitrate of silver, the constitutional symptoms have been immediately relieved; the constitutional disturbance is directly aggravated by the least increase of local inflammation, and in a few hours, after a decided application of the nitrate of silver, the inflammation has been arrested, and gradually subdued, and with it the constitutional symptoms cease.

Even in idiopathic erysipelas, there is no period of the disease when I would not apply the nitrate of silver; I have never in any case seen metastasis or any other bad effect from the use of this important remedy; on the contrary, I think it the best local remedy to prevent such mischief.

On Phlegmonous Erysipelas.—An early application of the solution of the nitrate of silver alone will sometimes be sufficient to check the progress of the inflammation.

If the inflammation be severe, attended with swelling, and the subcutaneous cellular tissue be much affected, a number of leeches should be applied on the inflamed part, or small incisions made with a lancet; a bread-and-water poultice applied, until the bleeding has ceased, then the concentrated solution to be applied freely upon and beyond the inflamed parts, and afterwards covered with a plaster of the neutral ointment, if suppuration be anticipated; if not, the parts should be exposed to the air, to form an eschar.

If the leech-marks or incisions afterwards become painful or irritable, a slight application of the nitrate of silver will be required.

By the above method of treatment, the inflammation is arrested and subdued, the suppurative process often prevented, and long incisions unnecessary. Should the system be affected, ipecacuanha emetics, saline purgatives, and repeated doses of calomel with James's powder.

On Inflammation of the Absorbents.—Constitutional remedies are often required, as venesection, emetics, purgatives, &c., and an immediate attention to the origin of the disease. If from a foreign substance, it must be removed; if from an abscess, it must be freely opened; or from an irritable ulcer, the nitrate of silver should be applied to destroy the irritation. The nitrate of silver should then be applied, either in substance or the concentrated solution, freely upon the whole of the inflamed and swelled surface, along the lines of inflammation, and beyond them on the surrounding skin. By these means, in twenty-four hours, the disease is generally most effectually arrested in its progress, and the numerous abscesses, often occasioned by this kind of inflammation, prevented.

Phlegmonous Inflammation.—Pure phlegmonous inflammation will be often arrested and subdued by the early application of the nitrate of silver, without any other remedy; but if it has proceeded so far as to be doubtful whether suppuration has taken place or not, the inflammation will be arrested, and the suppuration more circumscribed and limited in its extent.

If the tumefaction and inflammation are not subdued in four days after the application, it will be found that suppuration has taken place, and that the use of the lancet will be required to open the abscess, after which the wound will more rapidly heal than if the nitrate had not been used. The cold poultice may be applied every eight hours, and the nitrate of silver every second or third day, as required.

Small Irritable Ulcers with Varicose Veins.—Fill the small ulcers lightly with scrapings of the black lint, and cover them with a plaster of the neutral ointment, and apply graduated pressure with a bandage on the leg; it often happens that an adherent eschar is formed after the first application; but if not, the remedy must be repeated every third or fourth day. A bandage or lace-stocking should be continued.

Burns or Scalds.—In the first class of burns or scalds, where there is superficial inflammation, and in the second where there is simply vesication without destruction of the cutis, the application of the nitrate of silver as directed in erysipelas, often effects a speedy cure; the vesicles should be removed, and the nitrate of silver be applied on the exposed cutis, to form an eschar. If future dressings are required, the black lint and neutral ointment may be applied every third or fourth day. Should the burn or scald be exposed to friction on any part of the body, a plaster of the neutral ointment applied with a light bandage over it will be necessary.

In burns from the explosion of gunpowder, particularly on the face, the mode of healing by eschar with the nitrate of silver is very successful.

Gangræna Senilis.—An early application of the nitrate of silver is indispensable to give a chance of checking the progress of this dreadful disease. It has been used with decided success when the toes have assumed a dark color, and become a little swollen with purple vesications on the lower and outer part of the leg. The solid nitrate of silver may be applied (the affected parts being previously moistened with water) freely on the affected toes, and lightly on the surrounding healthy skin; and also on the denuded skin after the vesicles have been removed, so as to form an eschar. If successful, the eschar becomes adherent, the inflammation is subdued, and all further mischief prevented. In due time the eschar will be thrown off, leaving the parts underneath healed.

It will be desirable to give purgatives, and adhere to an antiphlogistic regimen during the cure.—*London Lancet.*

MEAT BISCUIT—A NEW ARTICLE OF FOOD.

[Some account was given, a few weeks since, of a new preparation of wheat as an article of diet, lately brought into notice in London. The article was more particularly intended for invalids, for the use of whom it would seem, in some cases, well adapted. The following letter from

Dr. Ashbel Smith, of Texas, well known in the political as well as medical world, relates to a preparation which promises to be of more general use; and, partaking of the nature of both the two general classes of daily food, and in a form concentrated and portable, would appear, from the description now given, to be a most important addition to our not very numerous preparations of food that will really *keep*. The letter is taken, much abridged, from a pamphlet just received from Galveston, in which Mr. Gail Borden, Jr., the inventor of the preparation, also describes it in a letter to Dr. Smith. Dr. S.'s letter is addressed to the American Association for the Advancement of Science, which holds a semi-annual meeting in Charleston, S. C., this month. A patent has been taken out.]

Mr. Borden claims, as you will see, to have discovered a process for combining in a cheap, convenient and portable form, all the nutritive portions of animal and farinaceous food. His invention has the further advantages that all refuse, excrementitious and superfluous matters are rejected; and that the meat biscuit, for so Mr. Borden denominates his prepared article, can be preserved *fresh*, without condiments or preservatives of any kind, for years, and in all climates—care only being taken that it be kept dry. From several satisfactory trials, it is proved that Mr. Borden's process is equally adapted for combining any farina, any flour or meal, with any of the meats of the animal kingdom used by man for food: but he has hitherto confined himself to combining wheat flour with the flesh of neat cattle.

I have examined with careful attention, and have several times eaten of the soup made of the meat biscuit—but, before speaking further of its uses, I will briefly allude to the manner of preparing the biscuit in question. The nutritive portions of the beef, or other meat, immediately on its being slaughtered, are, by long boiling, separated from the bones and fibrous and cartilaginous matters; the water holding the nutritious matters in solution, is evaporated to a considerable degree of spicitude—this is then made into a dough with firm wheaten flour, the dough rolled and cut into the form of biscuits, and then desiccated or baked in an oven at a moderate heat. The cooking, both of the flour and the animal food, is thus complete. The meat biscuits thus prepared have the appearance and firmness of the nicest crackers or navy bread, being as dry, and breaking or pulverizing as readily as the most carefully-made table crackers. It is preserved in the form of biscuit, or reduced to a coarse flour or meal. It is best kept in tin cases hermetically soldered up; the exclusion of air is not important, humidity alone is to be guarded against. I have seen some of the biscuit perfectly fresh and sound that have been hanging in sacks since last July in Mr. Borden's kitchen: and it is to be borne in mind, that in this climate articles contract moisture and moulder promptly, unless kept dry by artificial heat.

For making soup of the meat biscuit, a batter is first made of the pulverized biscuit and cold water—this is stirred into boiling water—the boiling is continued some ten or twenty minutes—salt, pepper, and other condiments, are added to suit the taste, and the soup is ready for the table. I have eaten the soup several times—it has the fresh, *lively*, *clean*, and thoroughly-done or cooked flavor that used to form the charm of the soups of the Rocher de Cancale. It is perfectly free from that vapid unctuous stale taste which characterizes all prepared soups I have hitherto tried at sea and elsewhere. Those chemical changes in food which, in common language, we denominate *cooking*, have been perfectly effected in Mr. Borden's biscuit by the long-continued boiling at first, and the subsequent baking or roasting. The soup prepared of it is thus ready to be absorbed into the system without loss, and without tedious digestion in the alimentary canal, and is in the highest degree nutritious and invigorating. It is to be noted, moreover, that the meat biscuit is manufactured without salt, pepper, or any condiment or chemical antiseptic whatever; thus the *freshness* or peculiar properties inherent to recently-slaughtered meat, are preserved, and a simple and perfect guarantee furnished of the goodness of any particular parcel. To the soup made of Mr. Borden's biscuit, as already intimated, salt and the various condiments used in soups may be added to suit the taste; also, toasted bread, vegetables, &c., as circumstances permit and fancy suggests, until the varied catalogue of the *potages* of the restaurateurs may be rivalled.

The different portable soups and prepared meats for long voyages, which I have seen, answer only imperfectly the ends for which they have been designed. Being prepared more or less with condiments, these meats differ from freshly-slaughtered animal food; they contain fibrous and indigestible portions, being more or less liquid in form, they are inconvenient to carry, and besides, thus necessitate the transportation of useless bulk. The meats put up for long voyages, in the manner just alluded to, are not wholly freed from fatty matters; these undergoing slight chemical changes in time, impair both the taste and quality of the food, into which they enter; nor are these meats so completely cooked as by Mr. Borden's double process of boiling and baking.

I might here insist on the very great conveniences of Mr. B.'s meat biscuit arising from its dryness. For long voyages it is best preserved in soldered tin cases or tight casks: but it may be carried in sacks, suspended from one's saddle-bow, for weeks or months over the prairies, or through the desert, without risk of spoiling, using care to keep it dry; and when a case or cask is opened, it may be economized for days or weeks, according to circumstances; whereas the liquid portable soups and prepared meats must be at once eaten, or they soon spoil, especially in damp or hot weather.

As no condiments nor chemical preservatives enter into the meat biscuit, it retains unchanged and unimpaired all its qualities of freshly-slaughtered meat: and, as already intimated, furnishes its own evidence and guarantee of soundness at the time of using.

As the meat biscuit requires only ten to twenty minutes to be made into a hot delicious soup, with the aid of fire and water only, its advantages for family use, for hospitals, at sea, and on long journeys over land, and wherever it is desirable to prepare food promptly, must be obvious.

We have thus, in the meat biscuit, an article of food, partly farinaceous, and partly animal, such as the system requires for long-continued use; it is easily preserved in all climates, seasons and circumstances—it is in a form the most concentrated and convenient for carriage—it is prepared with little trouble, and speedily; by its cheapness it is accommodated to universal use.

The advantages of the meat biscuit, for hospitals, are obvious: a nice, cheap, fresh, invigorating and easily-digestible soup can be prepared in a few minutes, at the moment, almost, when the taste and condition of the patient require it.

For private families, and especially small ones, and in the warm season, it is convenient by dispensing with the long hours of boiling required to prepare ordinary soups.

On long sea voyages, it furnishes at a cheap rate that indispensable requisite of health and preventive of scurvy, an occasional ration of fresh meat. But it is not for long voyages alone, to which it is adapted. Every one who has been at sea, knows the sparing use of fire on board ships. What could be more grateful, invigorating and healthful for the sailor, dripping with water and shivering with cold, than a bowl of hot soup, well seasoned with pepper, or other warming condiments; and how vastly more salutary than the ration of grog.

It has appeared to me that an invention, promising so much practical convenience and utility, deserves the examination and judgment of your learned Association. I shall accordingly forward to Charleston, in time for your semi-annual meeting, next month, in that city, some of the parcels of meat biscuit placed at my disposition by Mr. Borden. It is also my intention to transmit others of the parcels to the American Medical Association, which will meet in Cincinnati in June next, for their examination and judgment.

LUMBAR ABSCESS.

To the Editor of the Boston Medical and Surgical Journal.

Sir,—Believing it the duty of medical men to publish interesting and singular cases, for mutual benefit, I venture to speak of a recent case in my own practice.

John Hawkins, of Stockbridge, aged 20, was attacked with measles in February, 1849. He was quite sick for some days. The eruption finally came out well, and in a few days he appeared convalescing. But his appetite was poor, and there was more or less cough for some weeks. He often complained of severe pain in one side, and in the back, with chills and great restlessness. He commenced discharging thin pus by stool, from one to two ounces a day. Sometimes it would pass with the common alvine dejections; at other times pure pus would pass without pain or any unusual symptoms. This continued more or less from March until July 11th, when he died. His sufferings during the whole time were intense, unless under the influence of some opiate.

From the symptoms, the disease was evidently *lumbar abscess.* One side was much swollen and tender to the touch along the lumbar region; fluctuation could be detected, and there was some appearance of pointing within an inch or two of the spine. Should not an attempt have been made to relieve the patient by opening the tumor near the spine? Have we any precedent for thus opening a *psoas abscess*? Diseases of this character commonly procure an outlet by a circuitous course, producing much mischief and many alarming symptoms (as in this case), often forming a swelling above Poupart's ligament, sometimes below it, and sometimes it may glide under the fascia of the thigh. In this case the morbid matter found vent in small quantities through the *rectum*, passing off by stool. This, I believe, is something unusual.

A post-mortem examination was made, in presence of several physicians, but no passage, by ulceration or otherwise, from the exterior cavity in close proximity to the lumbar vertebræ, was found into either the colon or rectum, which were removed, washed and filled with water, and appeared entirely sound and healthy. How the matter got into the bowel, is still a mystery.

I believe this disease is seldom if ever cured. In this case it appears to me a *chance* of recovery might have been given by opening the abscess in the lumbar region near the spine. In that case we should avoid the danger from piercing the peritoneum, as the disease or suppuration is without the peritoneal sac. If any brother in the profession has succeeded in curing lumbar abscess, by resolution or opening the sac with scalpel or lancet, I wish he would report the case.

Respectfully yours, N. B. Pickett.

Great Barrington, Mass., March 11, 1850.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, MARCH 27, 1850.

American Medical Association.—Active preparations are indicated in Cincinnati, in regard to the approaching anniversary meeting in that city. Gentlemen on whom it devolves to present reports, should be arranging materials, that no lack of interest in the great objects contemplated may appear. Delegates, too, such is the facility for water and railroad conveyance, should be promptly on the spot. The scenery is so delightful on the lakes and rivers of the West, that a view of it is a compensation for the fatigues of a journey. Drs. Drake and Mussey, and the faculty generally in Cincinnati, will doubtless exert themselves to give the medical stranger a cordial reception.

Sulphate of Manganese.—Messrs. Philbrick & Trafton, well-known druggists in this city, are manufacturing an admirable article under the above name. The immense advantages over iron, which some European writers claim for manganese in its different forms, has induced that firm to exert themselves to prepare it in a faithful manner, that they may thus be in readiness to meet the growing demand in this country. They have also in preparation, iodide of manganese, syrup of iodide manganese, carbonate, oxide, phosphate, malate, tartrate, aud other preparations spoken of by M. Hannan in the last number of Braithwaite's Retrospect.

Trial of Professor Webster.—Some account of this trial will probably be expected in the Journal by its readers; and as both the parties thus far concerned in the melancholy affair belonged to the medical profession, and as much of the evidence is of a strictly medical nature, it is proper that a brief sketch of it should be recorded here, although full reports of the trial will probably first reach most of our readers. The trial commenced on Tuesday the 19th inst., at the Supreme Court in this city, before Chief Justice Shaw, and Associate Justices Wilde, Dewey and Metcalf. The Attorney General, Mr. Clifford, assisted by Geo. Bemis, Esq., are the Government officers, and the Hon. Pliny Merrick of Worcester, and Edward D. Sohier, Esq. of Boston, counsel for the prisoner. Less delay was experienced in empanelling a jury than was anticipated, and after the opening address of Mr. Clifford, the evidence of several important witnesses was given in on the first day. It mainly related to the fact of the sudden disappearance of Dr. Parkman on Friday, the 23d of November. The time when and the places where he was last seen, were sworn by several witnesses to have been a little before 2 P. M., in the immediate vicinity of the Medical College. The testimony subsequently given, respecting the business transactions between Dr. P. and Dr. Webster, was important, and was principally by R. G. Shaw, Esq., brother-in-law of Dr. P. This and the other evidence which we shall give has been taken from the reports in the Boston Transcript, Evening Journal, &c. In April, 1848, Dr. Webster being in pressing want of money, mortgaged his cabinet of minerals, containing 5000 specimens, to Mr. Shaw for $1200, $600 of which were then paid, and the remainder in June, when a bill of sale and catalogue were given to Mr. S. Subsequently this was mentioned by the latter to Dr. Parkman, who stated that he had a previous mortgage on them, which was at once shown to Mr. Shaw. It was dated Jan. 22, 1847, and conveyed the whole of Dr. Webster's furniture and effects to Dr. P., including the minerals, failing the payment, in four years, of $2400. The latter declared at the time that this was a downright fraud, and that Dr. Webster ought to be punished. It was afterwards proposed by Prof. Webster, to other individuals, that these minerals should be purchased of him and given to the College, and Mr. Shaw was called on to subscribe for this purpose, who agreed to deduct $500 from the $1200 owed him by Dr. W. The remaining $700 was afterwards paid him, but none of the money subscribed reached Dr. Parkman, who had since often importuned Dr. W.

The Medical College was visited by the police as early as Monday, the 26th, and the lecture and dissecting rooms, the attic, the vault connected with the dissecting room, &c. were searched. Prof. Webster's apartment was found locked, but they were politely admitted by him after knocking twice, and were told they might look, but were requested not to turn things over. On the officer's making a motion to go to the private room of the doctor, at the end of which is the small closet or privy, he told them that valuable and dangerous articles were in that room, and it was not searched. There was then a bright fire in the furnace in which the bones were afterwards found, and the stove contained ashes, which were only partially examined, Some spots were noticed on the stairs, but did not receive particular attention. Search was made in the building each day afterwards, but nothing found till Friday afternoon, when, Mr. Kingsley (formerly Dr. Parkman's agent) testifies, he went to the College, in company with others. "Starkweather and I rang the bell at the door, when Littlefield came round to us. He had been borrowing tools previously, for the purpose of breaking through the wall of the vault. We talked a few minutes together, and he said as much as to satisfy myself that that was his intention. I heard a noise while I stood at the door that convinced me that some one was at work on the brick work of the wall. He went back again to where I understood he had been so to work, and we left for the Marshal's office." Mr. Tukey, the City Marshal, testified—"On the evening of Friday, 30th November, I received certain information, and proceeded to the house of Mr. Shaw; afterwards to the Medical College, in company with Dr. Henry J. Bigelow; found in Littlefield's apartment officers Trenholm and Clapp; we all then went to a trap-door in Littlefield's apartment near the lower laboratory, which allowed passage into the cellar below; in the brick wall at the corner of the cellar was found a hole some 18 inches square, newly broken. I took a lamp, and reaching into the hole, perceived what I thought to be pieces of flesh; the sea-water was flowing in and out, but nothing else could pass out. I directed Mr. Trenholm to take out the remains; they were three pieces, apparently a portion of a body, a part of a thigh and leg. Dr. Bigelow said they were human, but not a dissection subject. While here, heard a noise in Prof. Webster's room above, and some one said probably he had come. We went up; I remained in outer room, while the officers went into the laboratory to search for the person supposed to have been heard. They reported that they could find no one. I then followed the officers into the laboratory and stopped near the furnace; Mr. Clapp took from the ashes what I discovered were fragments of bones. I then gave directions that nothing else be disturbed until by a commission from Court. Gave directions to some officers to proceed to Cambridge and arrest Dr. Webster." After Prof. Webster's arrest, that evening, and conveyance to the Jail in Boston, Coroner Pratt describes his appearance as follows. "On going into the lock-up, Dr. Webster was lying on his face, in great distress; Dr. Gay tried to console him, and asked him to get up; Dr. W. said he was not able; they then helped him up. He was extremely agitated, trembled violently, and exclaimed, 'What will become of my poor family!' He was taken up stairs, where I noticed he was in a great perspiration; the officers had to carry him up stairs, as he was nearly helpless. He was seated in a chair, and offered water; he was so agitated he could not drink; did not take the tumbler in his hands. Mr. Parker had before starting directed that no one should converse with Dr. Webster. He stated to him that some discoveries had been made at the Medical College, and that he (Dr. W.) could go there and make some explanations if he chose. Dr. W. consented to go, and was assisted to a carriage by officers. Mr. Leighton, the turnkey, and myself, rode inside with him. He was still apparently helpless from agitation. On the way, Dr. W. complained of the manner of his arrest and being taken from his family. He was led up the front steps of the College; entered by south front door, and went into the lecture room on the left; he was supported by Leighton and Cummings. Next went into the small laboratory; the door leading from the lecture room to the rear was broken open; somebody then inquired for the key of the adjoining room; Dr. W. said that was his private room, and contained some dangerous articles; that Mr. Clapp had the key of it. The door was finally broken open with an axe, and we entered; saw a coat near the door; Dr. W. said that was worn by him when he lectured; he requested the officers to be careful in handling things, or they would do mischief. Some person inquired where the chimney was that was heated; it was pointed out, and also the furnace; some one took off the cover from the furnace and took out pieces of bone, when I directed that it should not be further disturbed. There were some minerals, but they were all left alone. Dr. W. called again for water here, but could not drink. I never saw a man appear so before; the water seemed to be offensive to him; he snapped his teeth on touching the tumbler; he was more excited in this room than above; this was before he was shown the remains, I think." On the remains being placed before him, Mr. Kingsley testifies—"These were put in presence of Dr. Webster, who leaned against two officers as he looked on them, but he made no remark, neither was he asked any questions. He appeared excited, however, and not different from what he had been before. He stood within eight or nine feet of the remains at the time. We left, after looking at them for ten or fifteen minutes, and the prisoner was taken to the carriage. The next afternoon (Saturday) the upper part of a body and a thigh were found by officer Fuller in a tea-chest. I was called from the uppe rlaboratory to the lower, where I found the men drawing a tea-chest into the middle of the room. It was turned up, and the body tumbled out along with some tan. The thigh was inside the trunk, and the impression of the ends of the ribs were upon the flesh of the thigh, which was the left one. A large jack-knife also fell out of the chest, and a string was found tied round the body and legs. They were taken out and washed, and laid along-side of the other remains, which the officers had had in charge all the time from their being found." On Saturday the Coroner removed the contents of the furnace, and he states on the trial that "towards the bottom, a piece of artificial jaw was found, having in it some mineral teeth; could not say whether it was an entire block of manufactured teeth; it was put into the hands of Dr. Winslow Lewis, Jr.; the whole contents of the furnace occupied about a foot in depth; there were afterwards found two or three single teeth. The ashes remained after the bones, &c. were removed; and I gave directions that the whole should pass into the hands of the medical men and chemists, for examination of such parts as they individually chose." Both Mr. Shaw and Mr. Kingsley testified, as to the the remains, that they were similar to the body of Dr. Parkman.

We now come to the medical evidence, which is more fully given.

Dr. Winslow Lewis, Jr., sworn. I was one of the physicians who called at the College on Saturday, after Prof. Webster's arrest; the others were Dr. Martin Gay, and Dr. Charles T. Jackson. Coroner Pratt requested me to attend. It was about 3 o'clock in the afternoon. I called on Dr. George H. Gay and Dr. James W. Stone, and also requested the assistance of Dr. Jeffries Wyman. The next morning (Sunday) Dr. Wyman took charge of the bones and some other articles supposed to have blood on them; Drs. Gay, Stone and myself prepared a written report of what we particularly inspected, and rendered that statement to the Coroner's Jury. [The following is the report alluded to.]

Post-mortem Examination, at the Boston Medical College, Dec. 2, 1849, *at* 10 *A. M.*—Five portions of a human subject were examined; a thorax, a pelvis, two thighs, and a left leg; together with the contents of two boxes containing various articles said to be taken from a furnace. The thorax and left thigh were discolored, apparently with tan and some caustic substance; the three remaining ones were white, fair, and appeared as if soaked in water. The cartilage on the head of the left thigh bone was colored black.

Remains of Thorax, which consisted of all the bones except the sternum. Fracture of the fifth right rib, apparently recent, and about four inches from division between ribs and sternum.

Both clavicles and scapulæ present; clavicles large. Both lungs present, but collapsed. Left lung had pleural adhesions. Structure of both lungs apparently healthy.

Anterior thoracic muscles cut up from the ribs about six inches from the centre on each side, and with the skin thrown one side.

Posterior portion of integuments from the left scapula to the lumbar vertebræ, of a dark color and hardened. Remaining portion of integuments generally of a natural appearance, except a little greenness under the right axilla, probably from commencing decomposition, and some blueness under the left axilla, leaving the skin soft and easily broken, through artificial action.

An opening slightly ragged, about one and a half inches in length, under the left nipple, between the sixth and seventh ribs, extending into the chest.

Remains of thoracic aorta and thoracic œsophagus present. Heart and diaphragm wanting. Trachea divided through the cricoid cartilage. Spleen contracted; externally granulated and internally red. Left kidney in its natural position and contracted. No liver, right kidney, pancreas, stomach, or intestines.

Sixteen vertebræ present, consisting of three lumbar, twelve dorsal, and the greater portion of the seventh cervical, which appeared to have been sawn through the upper part.

Small quantity of long greyish hair on the front of the chest. Some stained dark greyish hair on the back.

Periosteum removed from the front part of several left ribs. Both arms severed in a very irregular and unscientific manner.

Pelvic portion consisted of the bones of pelvis, two of the inferior lumbar vertebræ, all the integuments, muscles, organs, &c., and the pelvic viscera generally. All of the intestine remaining was about six inches of the rectum, through the anterior and external portion of which a section had been made, and the mucous coat separated from it four or five inches, throughout the whole circumference, but not cut off at the lower end. Hair upon this portion of a sandy grey. Both thighs severed from it in a very irregular manner. Integuments divided down to the pubis in the median line. On placing the pelvic portion in apposition with the thoracic, the third and fourth lumbar vertebræ corresponded precisely. The spinous process of the third lumbar vertebra, with a portion of the transverse processes of the same, were absent from the thoracic portion, but were found attached to the fourth lumbar vertebra, which was on the pelvic portion.

Right Thigh—On being placed in apposition with the pelvic portion, the bone, flesh and skin corresponded perfectly. Good muscular development, with but little of fatty matter. Patella attached. Some ossification of femoral artery.

Left Thigh—Had a string with loose ends, about two and a half feet long, tied round just above the condyle. Patella attached. On being placed in apposition with the pelvis, the bones corresponded, but some portion of the skin and flesh appeared to have been removed, or contracted from artificial means. On the anterior surface of the thigh, and somewhat on other parts, there were appearances apparently of the action of fire or some caustic matter.

Left Leg—Of natural appearance, fair size, and on being placed in apposition with the left thigh, the articulation corresponded.

MEASUREMENTS.	*Inches.*	*Inches.*
Thoracic portion, length		17¼
" " below axilla, circumference	30	
Pelvic " length		9¾
" " circumference below crest of ileum	30½	
Both thighs (of the same length)		18
" " circumference of largest part of each	18¼	
Left leg, length to the outer malleolus		16
Total		61
Deduct distance from bottom of pelvis to top of acetabulum		3¾
		57¼
All the parts being placed in apposition, the distance from the seventh cervical vertebra to the outer malleolus		57½
Difference		¼
Circumference of largest part of left leg	12¾	
Right kidney afterwards discovered much contracted and discolored.		
Distance from sole of foot to the outer malleolus on another subject		3
Distance from top of head to sixth cervical vertebra		10
Total height, five feet ten and a half inches, or		70½

These portions appeared to belong to a person of between 50 and 60 years of age. The muscular system was well developed, and but very little of adipose matter. The fragments of bone found in the ashes and cinders from the furnace in Dr. Webster's laboratory, contained in one of the boxes, were:—1st, Fragments of a cranium, thirty or forty pieces. 2d, Fragments of a temporal bone. 3d, Coronoid portion of the lower jaw, probably that of an elderly person. 4th, A portion of the lower jaw, right side, containing a part of the dental canal. 5th, A fragment of an atlas, or first cervical vertebra. 6th, The body of a cervical vertebra, probably the second or third. 7th, Fragment of a humerus. 8th, Terminal phalanx of a finger. 9th, Fragments of a tibia, or leg bone. 10th, Fragments of metatarsal bones. 11th, Right os calcis. 12th, Right astragalus. 13th, Several pieces of mineral teeth, the more perfect portions of which being teeth in a block, which, on being shown to Dr. N. C. Keep, were identified as having been made by him for Dr. George Parkman, and corresponded to the mould in Dr. Keep's possession. Many fragments undetermined. Portion of ulna, and part of olecranon process.

Witness continued—There was nothing in the appearance of the body that I should not have expected to have found in the body of Dr. Parkman; and I should think that the parts had been separated by some hand skilled in anatomy. It is my opinion that the five parts belonged to one and the same body. *Cross-examined.*—I have been acquainted with Dr. Parkman, and had been intimate with him. I could not say that the idea would have arisen in my mind that the body was that of Dr. Parkman, had I not heard the rumor. That part of the chest in which there was a wound seemed to have been affected by some chemical agency; it was easily torn. I could not swear that there had been a stab. The hole penetrated to the region of the heart. I should think that about two gallons of blood could have been drawn from a live person corresponding in size with the parts we there examined. I have no means of knowing what time would be required to burn up a human head. As to how long a time it would take to consume the other portions of the body and contents missing, I cannot tell with any accuracy. It would undoubtedly depend somewhat upon the intensity of the fire, and the kind of fuel used. The lower limbs and muscles of this body were remarkably well developed, considering the slenderness of the chest.

By the Government.—As a general thing, a person stabbed in the region of the heart would bleed more internally than externally—that is, it would bleed more into the cavity of the heart. The flow of blood in the *arteries* ceases very shortly after death—though it may flow from the veins twenty-four hours after death.

Dr. James W. Stone, sworn. Heard the testimony of Dr. Lewis, and concur in the same. The muscles were exceedingly well developed. The hair of the back was longer than usual; in front it had been burnt so that its length could not so well be determined. I knew Dr. Parkman; there was nothing in these remains which I should not expect to find in his body. He was a great walker and a fast walker. We concluded that the breast bone was removed by some person having knowledge of anatomy; it was done in a surgical way. Should not think these remains could have been those of a subject for dissection. *Cross-examined.*—Particularly examined the ribs to see if there was any incision or stab made, but discovered none; was informed next day that such was found. I did see perforations of the membrane and muscle, but they were too irregular to have been done by a knife.

Dr. George H. Gay, sworn. Was one of the physicians who made a written statement to the Coroner's Jury. The separation of the parts of the body indicated some anatomical knowledge. The head was apparently sawed off, as done by surgeons; and other separations were performed after surgical methods. Concur with Dr. Stone that there was no proper indication of stabs in the thorax at the time of examination. Had an impression that the opening was made with a stick, as I had seen an officer cleaning off the dirt with one.

Dr. Woodbridge Strong, sworn. I am considerably versed in anatomy, and have made many post-mortem examinations. I have some experience in the matter of burning human remains. Soon after I came to Boston, years ago, the Marshal of the District committed to my charge the dead body of a pirate; the subject was of a robust man, and quite fleshy; it was determined to burn up the flesh; I commenced in the evening, at a place in Cornhill, and kept up a roaring wood fire till morning, throwing on piece after piece of muscle and flesh, but at broad day-light there remained much unconsumed. It requires very strict attention to do this business successfully, and the fuel is a matter of much consequence. Dry wood, and pitch pine in particular, is far better than coal.

I was at the College on Tuesday, near the middle of the day, after the remains were found on Friday night. The physicians had nearly finished their examination. I saw parts of a body lying on a board; they were the chest, the pelvis, the thighs and one leg. I discovered in the chest a clean cut between the ribs, which occurred to me might have been the cause of death. The remains were as bloodless as any meat in the shambles, suggesting to me that he bled to death. The skin had the appearance usually pertaining to an elderly person. I should think the subject must have been between 50 and 60 years of age. The body was narrow across the shoulders, and nearly corresponded with the width of the hips, which is unusual with males; the length of the body, too, was very marked. The hair was an intermixture of white and gray. From all the appearances, the remains seemed to me to be those of Dr. Parkman. Their formation was especially like his, and I saw nothing in any way dissimilar from what I should expect to find in his body.

Dr. Frederick S. Ainsworth, sworn. I am Demonstrator of Anatomy at the Medical College. Every subject brought there for dissection passes through my hands. I keep a regular account of all the subjects, and their disposal. At the time of the examinations there made for the Coroner's Jury, I found none of my material missing. I saw the remains taken from the privy, and am confident they never passed through my hands. In subjects for dissection, I inject the arteries with fluids to preserve the body; none such were found in the remains referred to. Dr. Webster had no official intercourse or connection with the anatomical department of the College. The remains bore no indication of being dissected anatomically; the person who cut up the body might have *seen* such performances before, but had not probably used the knife himself.

[The evidence of other important medical witnesses, including that of Dr. Keep, who identified the mineral teeth found as those he made for Dr. Parkman in 1846, must be deferred till next week. Up to Monday noon, the 6th day of the trial, the government evidence was not all in.]

Medical Miscellany.—The degree of Doctor of Medicine was conferred on 42 graduates at the Commencement of the Medical College of Ohio, held in Cincinnati March 5th. 27 of these belong to the State of Ohio, and 10 were from Indiana. The valedictory address was delivered by Prof. Lawson.—A history of the Medical Profession in the United States, from the first settlement of the Colonies down to the present time, has been prepared by Prof. N. S. Davis, now of Chicago, and will appear in successive numbers of the North Western Medical and Surgical Journal.—A State Medical Society has been formed in Wisconsin.—The St. Louis Medical and Surgical Journal, the publication of which has been suspended since the great fire in that city, has again appeared.—Dr. S. Hanbury Smith has succeeded the late Dr. Butterfield, of Columbus, Ohio, in the Chair of Practice in the Starling Medical College, and also as editor of the Ohio Medical and Surgical Journal.

To Correspondents.—A biographical sketch of the late Dr. Snell, of Maine, Dr. Williams's Dissertation on Colic, and a letter from our London Correspondent, have been received.

Many editorial articles are excluded from to-day's Journal by Dr. Webster's trial.

Deaths in Boston—for the week ending Saturday noon, March 23d, 65.—Males, 39—females, 26. Accidental, 1—inflammation of the bowels, 1—disease of the brain, 1—consumption, 5—convulsions, 2—canker, 2—croup, 1—dropsy, 2—dropsy of brain, 5—erysipelas, 1—lung fever, 4—brain fever, 1—inflammatory gout, 1—hooping cough, 2—disease of the heart, 2—infantile diseases, 7—inflammation of the lungs, 9—disease of the liver, 1—old age, 2—palsy, 1—smallpox, 10—suicide by poison, 1—teething, 1—worms, 1—unknown, 1.

Under 5 years, 27—between 5 and 20 years, 14—between 20 and 40 years. 12—between 40 and 60 years, 8—over 60 years, 4. Americans, 28; foreigners and children of foreigners, 37.

American Medical Association—Third Annual Meeting.—In consequence of a delay (January 31, 1850) in the distribution of the Transactions of the second meeting of the Association, held at Boston in May, 1849, the *Standing Committee of Arrangements*, appointed at that time, deem it expedient to give public notice, through the medical periodical press, that the next meeting will be held in Cincinnati, on Thursday, the 7th of May, ensuing; and, at the same time, they wish to make known to physicians the terms of membership. This they will do, by copying a part of the second article of the Constitution:—

"*The Delegates* shall receive the appointment from permanently organized medical societies, medical colleges, hospitals, lunatic asylums, and other permanently organized medical institutions of good standing in the United States. Each delegate shall hold his appointment for one year, and until another is appointed to succeed him, and shall participate in all the business and affairs of the Association.

"Each local society shall have the privilege of sending to the Association one delegate for every ten of its regular resident members, and one for every additional fraction of more than half of this number. The faculty of every regularly constituted medical college or chartered school of medicine, shall have the privilege of sending two delegates. The professional staff of every chartered or municipal hospital containing a hundred inmates or more, shall have the privilege of sending two delegates; and every other permanently organized medical institution of good standing, shall have the privilege of sending one delegate.

"*The Members by Invitation* shall consist of practitioners of reputable standing, from sections of the United States not otherwise represented at the meeting. They shall receive their appointment by invitation of the meeting after an introduction from any of the members present, or from any of the absent permanent members. They shall hold their connection with the Association until the close of the annual session at which they are received; and shall be entitled to participate in all its affairs, as in the case of delegates.

"*The Permanent Members* shall consist of all those who have served in the capacity of delegates, and such other members as may receive the appointment by unanimous vote.

"Permanent members shall at all times be entitled to attend the meetings, and participate in the affairs of the Association, so long as they shall continue to conform to its regulations, but without the right of voting; and when not in attendance, they shall be authorized to grant letters of introduction to reputable practitioners of medicine residing in their vicinity, who may wish to participate in the business of the meetings, as provided for members by invitation."

Dr. Drake, of Cincinnati, Chairman of the Committee, also gives notice that it is their duty to receive and present the reports of any standing Committees whose members cannot attend the meeting; and all communications on scientific subjects, which gentlemen, not members of the Association, may desire to lay before it. Also, to examine the credentials of delegates and register their names, which should, as far as possible, be done before the meeting, for which purpose the Committee will meet on the preceding day. They indulge the hope that this meeting will be well attended by physicians, and all who cultivate the sciences auxiliary to medicine; and that many distinguished physicians, not appointed as delegates, will attend and become members by a vote of the Association.